KEEP HIGH POINT BEAUTIFUL YOUTH ADVISORY COUNCIL MEMBERSHIP APPLICATION						
APPLICANT INFORMATION						
Full Name:						
Date of birth:	Email:	Phone:				
Current address:		'				
City:	State:	ZIP Code:				
PARENT/GUARDIAN INFORMATION						
Guardian Name:						
Guardian address:						
City:	State:	Zip:				
Phone:	Email:					
	SCHOOL CONTACT	INFORMATION				
Name of School:						
Address:		Phone:				
City:	State:	ZIP Code:				
Principals Name:						
HOW DID Y	OU HEAR ABOUT THE	YOUTH ADVISORY COUNCIL?				
	INVOLVED		RE YOU			
LIST 3 SKILLS OR TRAITS THAT AN EXEMPLARY LEADER POSSESSES						
1.						
2.						
3.						

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Choose one environmental is what inspires your commitm	sue about which you are passionate. ent to this issue.	In 50 w	ords or	less, describe		
Keep High Point Beautiful has a focus on litter prevention and beautification of the city. In 50 words or less, write what this means to you and one idea you have that could help promote this mission.						
REFERENCES						
Name	personal (non-familial), athletic, profession Address	Phone	cademic	Email		
Name	Address	Priorie		Liliali		
SIGNATURES						
I authorize the verification of the information provided on this form, to the best of my knowledge, as truthful and solely to my credit.						
Signature of applicant:			Date:			
Signature of Parent or Guardian:			Date:			

Applications can be submitted to Rebecca Coplin, High Point Beautification Supervisor, via email: rebecca.coplin@highpointnc.gov or mailed to: City of High Point, PO Box 230, High Point, NC 27261 (Attn: Rebecca Coplin).